

L12000061380

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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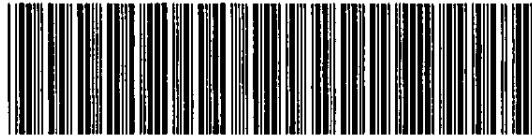
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Office Use Only

B. KOHR

MAY 25 2012

EXAMINER



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12 MAY 24 PM 4:10  
OFFICE OF THE CLERK  
STATE OF CONNECTICUT

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: 4209 Bay Vista, LLC**  
Name of Limited Liability Company

RECEIVED  
DIVISION OF CORPORATIONS  
12 MAY 24 PM 4:10

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Nancy Barnes, FRP**  
Name of Person

**Carey, O'Malley, Whitaker & Mueller**  
Firm/Company

**712 South Oregon Avenue**  
Address

**Tampa, FL 33606-2516**  
City/State and Zip Code

**nbarnes@cowmpa.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Nancy Barnes, FRP** at ( **813** ) **250-0577**  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

4209 Bay Vista, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

RECORDED  
12 MAY 24 PM 4:10

The Articles of Organization for this Limited Liability Company were filed on May 7, 2012 and assigned Florida document number L12000061380.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

c/o Prida, Guida & Company, P.A.

1106 North Franklin Street

Tampa, FL 33602

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

c/o Prida, Guida & Company, P.A.

1106 North Franklin Street

Tampa, FL 33602

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Andres S. Prida

New Registered Office Address:

1106 North Franklin Street

*Enter Florida street address*

Tampa

*City*

Florida

33602

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
**If Changing Registered Agent, Signature of New Registered Agent**

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	JIK Holdings, LLC	c/o Prida, Guida & Company, P.A. 1106 North Franklin Street Tampa, FL 33602	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jason I. Kislak	3116 West Hawthorne Road Tampa, FL 33611	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Katherine Kislak (Kathryn)	3116 West Hawthorne Road Tampa, FL 33611	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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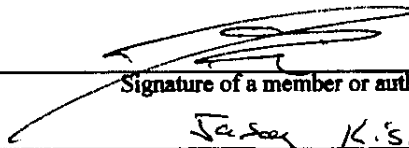
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\_\_\_\_\_

Dated May, 2012

  
Signature of a member or authorized representative of a member

Jason I. Kislak  
Typed or printed name of signee

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

4209 Bay Vista, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

12 MAY 21 PM 4:10  
CLERK OF COUNTY CLERK  
HILLSBOROUGH COUNTY, FLORIDA

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Florida document number L12000061380.

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Enter new principal offices address, if applicable:

c/o Prida, Guida & Company, P.A.

**(Principal office address MUST BE A STREET ADDRESS)**

1106 North Franklin Street

Tampa, FL 33602

Enter new mailing address, if applicable:

c/o Prida, Guida & Company, P.A.

**(Mailing address MAY BE A POST OFFICE BOX)**

1106 North Franklin Street

Tampa, FL 33602

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: Andres S. Prida

New Registered Office Address: 1106 North Franklin Street

*Enter Florida street address*

Tampa, Florida 33602  
*City Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

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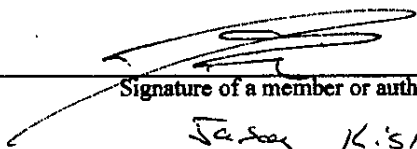
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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated May, 2012

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Jason Kislak  
\_\_\_\_\_  
Typed or printed name of signee